

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.D		7/26/99
O.I.P.E. CLASSIFIER			7/26/99
FORMALITY REVIEW	M.M	71628	8/11/99

# INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 (Through numeral) ..... Canceled  
 - ..... Restricted  
 BEST AVAILABLE COPY  
 A ..... Appeal  
 O ..... Objected

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If more than 150 claims or 10 actions  
staple additional sheet here

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